Application No.

Sri Sankara Arts and Science College

(A Unit of Sri Kanchi Kamakoti Peetam Charitable Trust)
Affiliated to University of Madras & Approved by AICTE New Delhi
Enathur, Kanchipuram – 631 561.

ISO 9001: 2000 Certified Institution

Phone: 044-27264066 Fax: 044-27264066

e-mail:

sankara1college@rediffmail.com website: www.sankaracollegeedu.in



APPLICATION FORM

For M.B.A Program

Affix colour
Passport Size
Photo here

Name of Candidate	:	

Course Applied	
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	,	ck Letters as recor	rded in									
1.		chool Certificate										
2.	i) Date of Birt	h		Date		Mor	nth		Υe	ear		
	ii) Age (as on	01.07.20										
3.	Sex			Male				Femal	е			
4.	Nationality											
5.	Name of Fat	her/Guardian										
	Occupation											
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6.	Mother's Nar	me										
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	Annual Incor	me		Rs.								
7.	Mother Tong	ue		Rs.								
8.	Religion											
9.		Proof to be attac	hed for	OC/BC/MBC/OBC/SC/ST								
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	Mobile No. of the Parent											
11.	Permanent A											
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(Enclose copies of all mark sheet, T.C and Conduct Certificates)

DECLARATION

- 1. The information furnished are true and correct to the best of our knowledge. The original certificates will be produced at the time of admission or on demand. In case any information furnished is found incorrect, we agree to forego any claim for admission or found to be false at a later date on verification, I / my son / daughter will forfeit the admission / seat, no matter at what stage of the course / class will be / at the time.
- I / my son/ daughter shall abide the rules and code of conduct formulated by the College from time to time and the decision of the College authorities in all such matters shall be final and binding on us.
- I/my son/daughter promise that, we will not take part in any activity prejudicial to the interests of the institution.
- 4. We accept that if I / my son / daughter wish to leave the Institution in the middle of the course we agree to pay tuition fee for the full course before the issue of the transfer certificate and other certificates.

Place:	
Date:	

Signature of the candidate

Signature of the Parent/Guardian